	6	
	UI .	
=	7	
_	c ·	
	• ,	Α,
	Ø.	
=	•	
▔	שי	
=	P	,
_		•

Please type a plus sign (+) inside this box		\blacksquare
---	--	----------------

PTO/SB/05 (03-01)
Please type a plus sign (+) inside this box

H
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY **PATENT APPLICATION TRANSMITTAL**

DP-307032 Attorney Docket No. Michael C. Pfeil First Inventor

FLOW MATCHING METHOD AND SYSTEM USIN Express Mail Label No. EL 129313025 US

(Only for new nonprovisional applications under 37 CFR 1.53(b))

(Grily for new nonprovisional applications under 57 Gril 1.35(b)) Express Wall Laber No.								
APPLICATION ELEMENTS				ADDRESS TO: Assistant Commissioner for Patents Box Patent Application				
See MPEP chapter 600 cond	cerning utility patent application conte			shington,				
1. (Submit an original and a	orm (e.g., PTO/SB/17) duplicate for fee processing)		7.	CD-ROM or CD-R in Computer Program			e table or	
2. Applicant claims s See 37 CFR 1.27				leotide and/or Amino A applicable, all necessary		ence S	ubmission	
3. Specification (preferred arrangement			a. [Computer Readab	•	CRF)		
- Descriptive title	of the invention to Related Applications		b. 5	Specification Sequence	Listing or	n:		
- Statement Reg	arding Fed sponsored R & D			i. CD-ROM o	r CD-R (2	2 copie	s); or	
	equence listing, a table, program listing appendix			i i. 🔲 paper				
- Background of	the Invention		с. [Statements verifyi	ng identit	y of ab	ove copies	
- Brief Summary	of the Invention on of the Drawings (<i>if filed</i>)		A	CCOMPANYING	APPLIC	ATIC	ON PARTS	
- Detailed Description				X Assignment Papers			•	
- Claim(s)				37 CFR 3.73(b) St	•		Power of	
- Abstract of the	Disclosure	_	10.	(when there is an a		L	Attorney	
4. X Drawing(s) (35 U	I.S.C. 113) [Total Sheets 3	<u></u> 1	11.	English Translation		ent (if a	pplicable) Copies of IDS	
5. Oath or Declaration	[Total Pages 1]]	12.	Information Disclos Statement (IDS)/P			Citations	
a. Newly exec	uted (original or copy)		13.	Preliminary Amend				
b. Copy from a (for continua	a prior application (37 CFR 1.63 (d)) ationIdivisional with Box 18 completed)	14.	Return Receipt Po (Should be specific			603)	
	TION OF INVENTOR(S) atement attached deleting inventor(s)		15. Certified Copy of Priority Document(s) (if foreign priority is claimed)					
named in	the prior application, see 37 CFR		16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35					
1.63(0)(2)	and 1.33(b).		-	(b)(2)(B)(i). Application or its equivalent.	ant must	attach	form PTO/SB/35	
6. Application Data	Sheet. See 37 CFR 1.76		17. F	Other:		••••		
18 If a CONTINUING APPL	CATION, check appropriate box, and	l sunnly	the requ	isite information below	and in a	nralimi	nanı amendment	
or in an Application Data She	eet under 37 CFR 1.76:	supply	ine requ	isite information below	anu m a p	oi eili i ili	iary amendment,	
Continuation	Divisional Continuation-in-part ((CIP)	0	f pnor application No.:				
Prior application information:	Examiner	-		Group Art Unit.				
For CONTINUATION OR DIVIS	IONAL APPS only: The entire disclosure f the disclosure of the accompanying co	of the p	orior appli	ication, from which an oa	th or dec	laration	is supplied under	
The incorporation can only be	relied upon when a portion has been in	adverter	ntly omitte	ed from the submitted ap	plication	ncorpoi parts.	ated by reference.	
	19. CORRESPO	ONDEN	CE ADD	RESS				
Customer Number or Bar C	ode Label (Insert Customer No. or Att	ach bai co	ide label hei	or 🔀	Correspon	dence ad	idress below	
Name	Scott A. McBain							
i e	Delphi Technologies, Inc.							
Address	P.O. Box 5052, Mail Code: 480-	414-42	20					
City	Troy	s	State	Michigan	Zip (Code	48007-5052	
Country	USA							
Name (Print/Type)	Douglas E. Erickson		Regi	stration No. (Attorne)	//Agent\	29.53	0	
Signature		- 1	1	1		<u> </u>	7 7 -	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO/SB/17 (10-01)

Approved for use through 10/31/2002, OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL	AMOUNT	OF DAVISE	
IUIAL	AINIUUNI	OF PAYMEN	V

(\$) 864.00

Complete if Known				
Application Number				
Filing Date				
First Named Inventor	Michael C. Pfeil			
Examiner Name				
Group Art Unit				
Attorney Docket No.	DP-307032			

METHOD OF PAYMENT	FEE CALCULATION (continued)					
The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES					
indicated fees and credit any overpayments to: Deposit	Large Small					
Account Number	Entity Entity Fee Fee Fee Fee Fee Description	Fee Paid				
Deposit	Code (\$) Code (\$)	ree Faiu				
Account Name	105 130 205 65 Surcharge - late filing fee or oath					
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet					
Applicant claims small entity status.	139 130 139 130 Non-English specification					
See 37 CFR 1.27 2. X Payment Enclosed:	147 2,520 147 2,520 For filing a request for ex parte reexamination					
2. X Payment Enclosed: Check Credit card Money Order Other	112 920* 112 920* Requesting publication of SIR prior to Examıner action					
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action					
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month					
Large Entity Small Entity	116 400 216 200 Extension for reply within second month					
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 920 217 460 Extension for reply within third month					
104 740 204 270 (1956) 455-45-	118 1,440 218 720 Extension for reply within fourth month					
106 330 206 165 Design filling fee 740.00	128 1,960 228 980 Extension for reply within fifth month					
107 510 207 255 Plant filing fee	119 320 219 160 Notice of Appeal					
108 740 208 370 Reissue filing fee	120 320 220 160 Filing a brief in support of an appeal					
114 160 214 80 Provisional filing fee	121 280 221 140 Request for oral hearing					
	138 1,510 138 1,510 Petition to institute a public use proceeding					
SUBTOTAL (1) (\$) 740.00	140 110 240 55 Petition to revive - unavoidable					
2. EXTRA CLAIM FEES Fee from	141 1,280 241 640 Petition to revive - unintentional					
Extra Claims below Fee Paid	142 1,280 242 640 Utility issue fee (or reissue)					
Total Claims 19 -20** = 0 X 18 = 0	143 460 243 230 Design issue fee					
Claims 4 -3 - 1 X 64 = 64	144 620 244 310 Plant issue fee					
Multiple Dependent	122 130 122 130 Petitions to the Commissioner					
6	123 50 123 50 Processing fee under 37 CFR 1.17(q)					
Large Entity Small Entity Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt					
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)	40.00				
102 84 202 42 Independent claims in excess of 3 104 280 204 140 Multiple dependent claim, if not paid	146 740 246 370 Filing a submission after final rejection (37 CFR § 1.129(a))					
109 84 209 42 ** Reissue independent claims over original patent	149 740 249 370 For each additional invention to be examıned (37 CFR § 1.129(b))					
110 18 210 9 ** Reissue claims in excess of 20	179 740 279 370 Request for Continued Examination (RCE)	ľ				
and over original patent	169 900 169 900 Request for expedited examination of a design application					
SUBTOTAL (2) (\$) 84.00	Other fee (specify)					
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.0	0				

SUBMITTED BY				Complete (if	Complete (if applicable)		
Name (Print/Type)	Douglas E. Erickson			Registration No. (Attorney/Agent)	29,530	Telephone	(937)443-6814
Signature	Doulas	€.	Ein	low		Date	1/10/02

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.